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U.S. Department	INFORMATION ACT (FOTA), 5.U.S.C.					552(B)(6)		-	Repository 🗌	
of Transportation  To Report Vehicle Safety Defects  1-888-DASH-2-DOT								2000		
National Highway (1-888-327-4236)						23-	JUL-2015		Reference No.	
Administration INTERNET:www.nhtsa.dot.gov/hotline							AUG 2 5 2015			
OWNER INFORMATION (Type or Print)						Daytime Telephone Number E-mail Address			il Address	
Name						out the second of the second o		2 17.0		
Address	State Zip Code					Evening Telephone Number				
City RADCLIFF		KY						1		
The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).										
VEHICLE INFORMATION										
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side Make						Model			Model Year	
JTKDE3B77A0						SCIONTC			2010	
Date Purchased D	Dealer's Name and Telephone Number						Engine: No: Cylinders		Fuel Type:	
Original Owner D	ealer's City			State	Zip (	ode				
Transmission Type  Antilock Brakes Powertrain M					ailure:		Incident	: Date(s	i) *	
Cruise Control							17-1	EB-201	15	
FAILED COMPONENT(S)/PART(S) INFORMATION										
Vehicle Component Codes: 980000 UNKNOWN OR OTHER, 220000 SEATS							Failure M 804	-	Failure Speed 35	
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE										
Tire Make Tire Model (Name or Number)						Tire Size (Example P215/65R15)				
DOT No. (Example: DOTMAL9ABC036)		Original Equipment Prlor Repair		Failure Location:		:				
Tire Component Code				Tire Failure Type:						
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE										
Make: Date Manufactured: Model No./Name:										
Seat Type: Installation System: Child Seat Component Code: Failed Part;										
APPLICABLE INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Crash(es), and injury (ies).)										
Crash Fire		ber of Persons Iniu		imber of De			ed to Police			
Yes X No Yes		0		0			N		*	
Narrative Description of Incident(S), Crash(es), and Injury(ies). Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).										
I PURCHASED MY SCION FROM MY LOCAL DEALERSHIP IN FEB OF 2015. ON THE 17TH OF MARCH WHEN COMING TO A STOP THE DRIVER SEAT MOVED FORWARD ON ITS OWN. THE SEAT HAD BECAME UNLATCHED FROM THE SEAT RUNNER UNDER THE DRIVER SEAT. I HAD TO ADJUST THE SEAT AND MADE SURE THAT IT LOCKED INTO PLACE. SINCE THEN THIS PROBLEM HAS HAPPENED OVER AND OVER. I WOULD SAY AT LEAST 40 TIMES, THE SEAT WILL NOT LOCK INTO PLACE WHEN YOU SLIDE THE SEAT FORWARD OR MOVE IT TO PLACE ITEMS BEHIND IT AS WELL. IT WILL LOCK ON ONE SIDE OF THE SEAT RUNNER AT TIMES AND I HAVE TO ADJUST IT EACH TIME. THIS PROBLEM CAN BE A SAFELY ISSUE WHEN BRAKING HARD OR IN A ACCIDENT AS WELL. I HAVE SEEN RECALLS ON THIS PROBLEM WITH OTHER MODELS OF THIS AUTO, I TALK TO MY LOCAL TOYOTA DEALERSHIP ABOUT THE PROBLEM BUT THEY SAY THERE IS NO RECALL OR REPAIR BULLETIN ON MY MODEL AT THIS TIME.										
Include if available: Police/Fire Department Report, Photos, and Repair Invoice							ATTACH ADDITIONAL CHEETS IS NECESSABY			

The Privacy Act of 1974-Public Law 93-579 This Information is requested pursuant to authority vested in the National Highway Traffic Sefety Act and subsequent amendments. You are under no obligation to respond this questionnaline, Your response may be used to assist the NHTSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.